Mu	ministrative Region 1 nicipality of Addis A bassy of the United	baba	ss:				
Before me,			, of the United States of America at Addis Ababa, Ethiopia,				
dul	y commissioned and	qualified person	ally appeared :			·	
Given		Middle (Father's name)		Last (Grandfather's name)			
per	•	tisfactorily identi	fied to me who being	g duly sworn d	leposes and say	s as follows:	
1.	1. My name is: Given I reside at: Street addres		Middle (Father's name)		Last (Grandfather's name)		
			City		State		
2.	I was previously m	arried. That mar	riage ended on:	Date	Month	Year	
	Divorce decree	or death certific	ate was issued on				
	Divorce decree	or death eer time		Date	Month	Year	
	I am now legal	ly free to remarr	y and intend to mar	ry.			
Nar	me of intended spoເ	ise:					
		(Given Middle (I	Father's name)	Last (Grand	father's name)	
Date of birth of intended spouse:		ed spouse:	Date	Date Mo		Year	
3.	I am employed	by:					
	My annual inco	me is:					
	My father's full	name:					
	My mother's fu	II name:					
and	I further, the depond	ent saith not:					
		STOP! Do not sig	gn until requested to	do so by an o	official.		
Sub	scribed and sworn k	efore me on:					
			Signature of Affiant				
	Date		•				
				Signature of Officer			
Seal			Emba	Embassy of the United States of America			

Addis Ababa, Ethiopia

Ethiopia